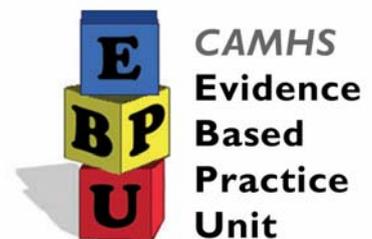


# Mental Health Outcome Measures for Children and Young People



UCL & The Anna Freud Centre

## **Editors**

Dr Jessica Deighton

Dr Miranda Wolpert

CAMHS EBPU, University College London (UCL) and the Anna Freud Centre

**Systematic review team** – CAMHS EBPU, University College London and the Anna Freud Centre

Hayley Syrad

Maria Munroe

Cathy Saddington

Emma Trustam

Jenna Bradley

Paula Lavis

Alice Jones

## **Collaborating Academics**

Dr Tim Croudace, University of Cambridge

Dr Jeb Brown, Center for Clinical Informatics, Utah

Professor Peter Fonagy, UCL and the Anna Freud Centre

Professor Norah Frederickson, UCL

Dr Neil Humphrey, University of Manchester

Dr Pam Meadows, National Institute of Economic and Social Research

Professor Peter Tymms, Centre for Education and Monitoring, Durham University

Professor Panos Vostanis, University of Leicester

Dr Crispin Day, Institute of Psychiatry, King's College London

Dr Sevasti-Melissa Nolas, CAMHS EBPU, UCL and the Anna Freud Centre

Professor Sir Michael Rutter, Institute of Psychiatry, King's College London

## **Contact details:**

Dr. Jessica Deighton, Research Fellow

CAMHS EBPU, The Anna Freud Centre,

21 Maresfield Gardens, London NW3 5SD

Email: [jessica.deighton@annafreud.org](mailto:jessica.deighton@annafreud.org)

PDF copies of this resource are freely available from:

[www.annafreud.org/ebpu](http://www.annafreud.org/ebpu)

ebpu@annafreud.org

ISBN 0-9553956-6-6

# Contents

<b>Section</b>	<b>Page number</b>
Introduction	1
How to use this booklet	2
Mental Health and Psychological Adjustment Measures	3
Quality of life measures	48
Index of measures	60

# Introduction

The measures summarised in this booklet were identified through a systematic review process which aimed to identify broad measures of mental health outcome suitable for use with children and young people with a wide range of difficulties (Wolpert et al., 2008<sup>1</sup>). This review was conducted to in order to advise the Departments of Children Schools and Families and Health on which are the best measures that could be implemented to influence the system to promote better psychological well-being and effective intervention for those children with mental health problems.

Within the specific remit of the review, child mental health outcome measures were defined as “Any questionnaire, measure or approach to measurement that seeks to provide measurement of mental health in children and young people (up to 18 years).” The review specifically emphasized measures that:

1. Reflected a broad gauge of mental health
2. Could be used with a relatively wide age range
3. could be administered on a wide scale relatively cheaply

All the measures included in this booklet were identified through one of the following processes:

1. Systematic searches of 4 main databases
2. Consultation with key stakeholders implementing child mental health outcome measures
3. Measures already known to the authors

For further details on these processes, see Wolpert et al. (2008).

The aim of this booklet is to share our learning and the information we collected through the process of conducting this review. We hope this booklet acts as a useful starting point for those looking to use measures of child mental health and psychological well-being either for research purposes or for routine evaluation and monitoring. We would emphasise that anyone seeking to use any of these measures should supplement the information included here with further investigation of the psychometric properties of the measure and its suitability for their population of interest and check on up to date costs (the information presented below was correct as of October, 2008). Whilst this is not an exhaustive list – due to the parameters set by the original review – we hope it may be helpful to people looking for measures relevant to their specific projects. We aim to update and revise this resource in future years. We welcome comments from people as to how they find it.

Jessica Deighton and Miranda Wolpert

---

<sup>1</sup> Wolpert, M., Aitken, J., Syrad, H., Munroe, M., Saddington, C., Trustam, E., Bradley, J., Nolas, S. M., Lavis, P., Jones, A., Day, C., Fonagy, P., Frederickson, N., Humphrey, N., Meadows, P., Rutter, M., Tymms, P. Vostanis, P. & Croudace, T. (2009). Review and recommendations for national policy for England for the use of mental health outcome measures with children and young people. DCSF Research Report 2008/56. Nottingham: DCSF Publications.

# How to use this booklet

Measures have been organised into two key domains:

- 1) mental health/psychological adjustment measures and
- 2) quality of life measures

Descriptions of each measure within these two domains are split into the following sections<sup>2</sup>:

Section	Description
Brief Description	Gives a brief overview of the content and structure of the measure
Versions	Describes the different versions of the measure available – for example, if there are parent and child reporter versions, whether there are short forms available
Length	The number of items and/or the time it takes to complete the measure
Scales and subscales	Whether the measure is one uni-dimensional scale or several shorter subscales making up the full measure (and what these subscales are)
Response scales	The response format/response options used within the measure.
Example Items	A number of example questions/statements contained in the measure
Cost	Prices for manuals, paper copies etc.
References and Contacts	Details of existing literature or contact details where you might obtain further information

---

<sup>2</sup> NB it was not possible for all sections to be completed for all measures with the information available. Where information was unavailable, sections have been omitted.

# **Mental Health and Psychological Adjustment Measures**

# Achenbach System of Empirically Based Assessment (ASEBA)

## Brief Description

The ASEBA measures contain brief, closed ended questions relating to psychological adjustment. The main measures (Teacher Report Form, Child Behavior Checklist, and Youth Self-Report) contain 8 subscales: anxious/depressed, withdrawn/depressed, somatic complaints, social problems, thought problems, attention problems, rule-breaking behaviour and aggressive behaviour. It can also be summed into internalising and externalising subscales. Items can also be coded to reflect DSM-oriented scales.

## Versions

- Teacher Report Form (TRF) and Parent form (Child Behavior Checklist, CBCL): 1.5-5yrs and 6-18 years
- Youth Self-Report (YSR): 11-18 years

## Length

- YSR = 105 items, 15mins
- TRF = 120 items, 15 minutes
- Parent = 120 items, 15 minutes

## Scales and subscales

- Anxious/depressed
- Withdrawn/depressed
- Somatic complaints
- Social problems
- Thought problems
- Attention problems
- Rule-breaking behaviour
- Aggressive behaviour

## Response scales

- 0, 1, 2 (always, sometimes, never)

## Example Items

- I act too young for my age
- I feel confused or in a fog
- I don't get along with other kids

## Cost

- Hand scoring forms = \$7 each or x50=\$25
- Parent forms x50 = \$25
- Computer upgrade = \$195
- Computer scoring kit = \$395

**References and Contacts**

- Achenbach, T. M. (1991). *Manual for the Child Behavior Checklist 4-18 and 1991 profile*. Burlington: University of Vermont, Department of Psychiatry.
- Achenbach, T. M. & Rescorla, L. A. (2001). *Manual for ASEBA school-age forms and profiles*. Burlington, VT: University of Vermont, Research Centre for Children, Youth and Families.

# Beck Youth Inventories (BYI)

## Brief Description

The Beck Youth Inventories (BYI) contain of 5 individual inventories that can be used individually or together. These are depression inventory, anxiety inventory, anger inventory, disruptive behavior inventory and self-concept inventory. Each inventory has 20 statements.

## Versions

- 5 child self-report inventories:
  - depression inventory
  - anxiety inventory
  - anger inventory
  - disruptive behavior inventory
  - self-concept inventory

## Length

- 5 inventories, each with 20 questions, 5 minutes per inventory.

## Scales and subscales

- Anger inventory
- Anxiety inventory
- Depression inventory
- Disruptive behavior inventory
- Self-concept inventory.

## Response scales

- 0, 1, 2, 3 (never, sometimes, often, always).

## Example Items

- I fight with others
- I wish I were dead
- I do things well

## Cost

- Anger inventory, pad of 25: £45.83
- Anxiety inventory, pad of 25: £45.83
- Depression inventory, pad of 25: £45.83
- Disruptive behavior inventory, pad of 25: £45.83
- Self-concept inventory, pad of 25: £45.83
- Manual: £55.50

**References and Contacts**

- Beck, J., S., Beck, A., T., Jolly, J., B., & Steer, R., A. (2005). Beck Youth Inventories - Second Edition for Children and Adolescents (BYI-II). Harcourt Assessment, Texas
- Beck, J.S., Beck A. T., and Jolly, J. (2001) *Manual for the Beck Youth Inventories of Emotional and Social Adjustment*. San Antonio, TX: The Psychological Corporation.

# Behavior Assessment System for Children (BASC)

## Brief Description

Parent Rating Scales (PRS) and Teacher Rating Scales (TRS) contain items regarding emotional problems, behavioural problems and adaptive behaviour. The Self-Report of Personality (SRP) contains items regarding emotions and self-perceptions. The PRS, TRS and SRP can be scored on primary scales, composite scales and content scales.

## Versions

- PRS
- TRS
- SRP

## Length

- PRS = 134-160 items (10-20 minutes to complete)
- TRS = 100-139 items (10-15 minutes)
- SRP = 139-185 (20-30 minutes)

## Scales and subscales

- The primary scales of the PRS and the TRS are:
  - adaptability
  - aggression
  - anxiety
  - attention problems
  - atypicality
  - conduct problems
  - depression
  - functional communication
  - hyperactivity
  - leadership
  - social skills
  - somatization
  - withdrawal
- PRS also includes activities of daily living. TRS also includes learning problems and study skills.
- The primary scales of the SRP are:
  - anxiety
  - attention problems
  - attitude to school
  - attitude to teachers
  - atypicality
  - depression
  - hyperactivity
  - interpersonal relations
  - locus of control

- relations with parents
- self-esteem
- self-reliance
- sensation seeking sense of inadequacy
- social stress
- somatization

**Response scales**

- PRS = 4 point scale (never, sometimes, often and almost always)
- TRS = 4 point scale (never, sometimes, often and almost always)
- SRP = 4-point scale (never, sometimes, often and almost always) and some true/false

**Cost**

- Manual = \$89.
- Hand-scored forms x25 = \$33.50.
- Computer entry forms = \$28

**References and Contacts**

- Kamphaus, R., W. (2004). *Behavior Assessment System for Children - Second Edition: Manual*. Circle Pines, MN: AGS Publishing.
- Reynolds, C. S. & Kamphaus, R. W. (2002). *The Clinician's Guide to the Behavior Assessment System for Children (BASC)*. New York : The Guilford Press.

# Behavioral and Emotional Rating Scale (BERS)

## Brief Description

The BERS is a strength-based approach to assessment and gives an overall index of a child's strengths and competencies. Respondents rate the child on 52 items on a scale of 0 to 3. Items cover domains such as interpersonal strengths, functioning at school, affective strength, intrapersonal strength, family involvement and career strength.

## Versions

- Youth Rating Scale (YRS)
- Parent Rating Scale (PRS)
- Teacher Rating Scale (TRS)

## Length

- 52 items in parent and teacher scales - 10 minutes

## Response scales

- 0, 1, 2, 3 (not at all like the child; not like the child; like the child; very much like the child).
- Eight open-ended questions (e.g. Who is this child's best friend? What are the child's favourite hobbies or activities?)

## Example Items

- Participates in community activities
- Is self confident
- Listens to others

## Cost

- Introductory kit (BERS-2 Examiner's Manual, 25 Teacher Rating Scales, 25 Parent Rating Scales, 25 Youth Rating Scales, and 50 Summary Forms) = \$190
- manual = \$69
- each version \$36 (25 pack)

## References and Contacts

- Epstein, M., H. (2000). The Behavioural and Emotional Rating Scale: A strength-based approach to assessment. *Assessment for Effective Intervention, 25 (3)*, 249-256.
- Epstein, M., H. (1999). The development and validation of a scale to assess the emotional and behavioural strengths of children and adolescents. *Remedial and Special Education, 20*, 258-262.
- Epstein, M., H. & Sharma, J. (1998) *Behavioral and Emotional Rating Scale: A Strength-Based Approach to Assessment*. PRO-ED. Austin, Texas.

# Child Adaptive Behavior Inventory (CABI; CBI)

## Brief Description

This measure consists of closed-ended questions assessing psychological functioning. Early version revealed two broad categories: academic competence or adaptability, and social adjustment (Schaefer & Edgerton, 1978). The most recent version (see work by Cowan and colleagues in references below) suggests subscales measuring Social Competence, Externalizing-Aggressive, Externalizing-Hyperactive, Internalizing-Socially Isolative, and Internalizing-Psychological symptoms.

## Versions

- 5-18 yrs, teacher/parent report.

## Length

- Approximately half an hour for entire instrument.
- Original = 60 items.
- Version used by Cowan and Cowan (1991) = 106 items.

## Scales and subscales

- Most recent version (Cowan and colleagues, 1990, 1991) appears to have subscales measuring:
  - Social Competence
  - Externalizing-Aggressive
  - Externalizing-Hyperactive
  - Internalizing-Socially Isolative
  - Internalizing-Psychological symptoms

## Response scales

- 5-point scale (not at all, very little, somewhat, much, and very much like the child)

## References and Contacts

- Cowan, C. P., Cowan, P. A., Heming, G., & Miller, N. B. (1991). *Becoming a family: Marriage, parenting, and child development*. In P. A. Cowan & E. M. Hetherington (Eds.), *Family transitions* (pp. 79–109). Hillsdale, NJ: Erlbaum.
- Cowan, P. A., & Cowan, C. P. (1990). *Becoming a family: Research and intervention*. In I. Sigel & G. Brody (Eds.), *Method of family research: Biographies of research projects* (pp. 1-51). Hillsdale, NJ: Erlbaum.
- Schaefer, E. S., & Edgerton, M. (1978). Classroom Behavior Inventory. Unpublished manuscript.

# Child Behavior Rating Form Typical IQ version (CBRF-TIQ)

## **Brief Description**

This measure contains 10 positive social items and 56 problem behaviour items relating to emotional and behavioural problems. It produces scores for individual subscales plus scores for disruptive behaviour disorder and ADHD.

## **Versions**

- Child, parent and teacher versions for children 5-15yrs

## **Length**

- 66 items

## **Scales and subscales**

- 7 subscales:
  - positive social
  - overly sensitive
  - oppositional
  - conduct problem
  - hyperactive
  - inattentive
  - withdrawn/dysphoric

## **Response scales**

- 4 point scales
  - 0 = not true, 1 = somewhat or sometimes true, 2 = often or very true, 3 = completely or always true
  - b) 0 = behaviour did not occur or was not a problem, 1 = behaviour occurred occasionally or was a mild problem, 2 = behaviour occurred quite often or was a moderate problem, 3 = behaviour occurred a lot or was a severe problem

## **Example Items**

- Threatens people
- Isolates self
- Argues

## **Cost**

- Available free to researchers and clinicians for assessment and treatment

**References and Contacts**

Aman, M., G., Leone, S., Park, L., Buican, B., Lecavalier, L., & Courcy, D. (2008). The Nisonger Child Behaviour Rating Form: Typical IQ version. *International Clinical Psychopharmacology*, 23(4), 232-242.

# Child Outcome Rating Scale (CORS)

## Brief Description

The CORS is an overall measure of psychological distress. It is very brief, consisting of only 4 items.

## Versions

- Child report of distress (though may be completed by other)
- Session rating scale

## Length

- Child report: 4 items
- Session rating scale: 4 items

## Scales and subscales

- Child report: No subscales, one construct: psychological distress
- Session Rating Scale: No subscales, one construct: rating of experience with clinician

## Response scales

- Child report: 10cm line with happy face at one end and sad face at the other, respondent asked to put mark on line.
- Session rating scale: 10cm line, respondent asked to put mark on line

## Example Items

- Child report:
  - Me (How am I doing?)
  - Family (how are things in my family?)
  - School (how am I doing at school?)
  - Everything (how is everything?)
- Session rating scale:
  - Relationship (I did/did not feel heard, understood, and respected)
  - Approach or method (The therapist's approach is/is not good for me)

## Cost

- Free for paper version, fee for use of electronic version with automatic scoring.

## References and Contacts

Duncan, B. L., Miller, S., Sparks, J. (2003). *The Children's Outcome Rating Scale*. Chicago  
Miller, S. D., Duncan, B. L., Brown, J., Sparks, J. A., & Claud, D. A. (2004). The Outcome Rating Scale: A preliminary study of the reliability, validity, and feasibility of a brief, visual, analog measure. *Journal of Brief Therapy*, 6, 68-88.

www.talkingcure.com; [www.heroicagencies.org/CORS.htm](http://www.heroicagencies.org/CORS.htm)

# Child Symptom Inventories (CSI)

## Brief Description

The Child Symptoms Inventories (CSI) are a screening tool for DSM IV emotional and behavioural disorders. It covers disorder such as ADHD, Oppositional Defiant Disorder, Conduct Disorder, Generalized Anxiety Disorder, Social Phobia, Separation Anxiety Disorder, Obsessive-Compulsive Disorder, Specific Phobia, Major Depressive Disorder, Dysthymic Disorder, Schizophrenia, Pervasive Developmental Disorder, Asperger's Disorder, Motor Tics and Vocal Tics.

## Versions

- Parent, teacher and child self-reports
- ECI-4: 3-5yrs
- CSI-4: 5-12 yrs
- ASI-4: 12-18
- YI-4: 12-18

## Length

- Between 77 and 108 items depending on version and reporter

## Response scales

- Each item is rated on a 4-point response scale, indicating how often the symptom is observed. Can be scored to derive symptom count scores (diagnostic model) or Symptom Severity scores (normative data model)

## Example Items

- Loses temper
- Starts physical fights
- Has been physically cruel to animals

## Cost

- \$42.00 per version (pack 50)

## References and Contacts

Gadow, K. D. & Sprafkin, J. (2002). *Child Symptom Inventory 4: Screening and Norms Manual*. Stony Brook, NY: Checkmate Plus.

Gadow, K.D., & Sprafkin, J. (1994). *Child Symptom Inventories manual*. Stony Brook, NY: Checkmate Plus.

# Conners' Rating Scales (Conners, various years)

## Brief Description

The main use of the CRS is for the assessment of ADHD. However, the subscales provide information useful for assessment of conduct problems, cognitive problems, family problems, emotional, anger control and anxiety problems. The CRS-R can be used for screening, for treatment monitoring, as a research instrument, and as a clinical diagnostic aid.

## Versions

- Parent long version
- Parent short version
- Teacher long version
- Teacher short version
- Self-report long version
- Self-report short version

## Length

- Parent long version: 80 items
- Parent short version: 27 items
- Teacher long version: 59 items
- Teacher short version: 28 items
- Self-report long version: 87 items
- Self-report short version: 27 items

## Scales and subscales

- Parent long version:
  - oppositional
  - cognitive problems/inattention
  - hyperactivity
  - anxious-shy
  - perfectionism
  - social problems
  - psychosomatic
  - Conners Global Index
  - DSM-IV symptom subscales
  - ADHD index
- Parent short version:
  - oppositional
  - cognitive problems/inattention
  - hyperactivity
  - ADHD index

- Teacher long version:
  - oppositional
  - cognitive problems/inattention
  - hyperactivity
  - anxious-shy
  - perfectionism
  - social problems
  - Conners Global Index
  - ADHD index
  - DSM-IV symptom subscale
  
- Teacher short version:
  - oppositional
  - cognitive problems/inattention
  - hyperactivity
  - ADHD index
  
- Self-report long version:
  - family problems
  - emotional problems
  - conduct problems
  - cognitive problems/inattention
  - anger control problems
  - hyperactivity
  - ADHD index
  - DSM-IV symptom subscales
  
- Self-report short version:
  - scales include conduct problems
  - cognitive problems/inattention
  - hyperactivity
  - ADHD Index

### **Response scales**

4 point response scale

### **Example Items**

- I have trouble finishing things
- I start lots of things but I don't finish them
- It is hard for me to pay attention to details

### **Cost**

- Long versions: \$43.25
- Short versions: \$40.50 (packs of 25)
- \$425 per complete kit including manual
- \$26 per 25 Quick Score forms

- \$22 per feedback forms
- \$46 per technical manual
- \$40 per user's manual
- \$45 per Windows preview version including 3 administrations/interpretive reports, and user's manual
- \$10 per computer interpretive report
- \$4 per computer profile report

### **References and Contacts**

Conners, C. K. (1997). *Manual for the Conners' Rating Scales – Revised*. North Tonawanda, NY: Multi- Health Systems.

Conners, C. K., Sitarenios, G., Parker, J. D., & Epstein, J.N. (1998). The revised Conners' Parent Rating Scale (CPRS-R): factor structure, reliability, and criterion validity, *Journal of Abnormal Child Psychology* 26, 257–268.

Conners, C. K., Wells, K. C., Parker, J. D., Sitarenios, G., Diamond, J. M., & Powell, J. W. (1997). A new self-report scale for assessment of adolescent psychopathology: factor structure, reliability, validity, and diagnostic sensitivity, *Journal of Abnormal Child Psychology*, 25, 487–497.

# Development and Well-Being Assessment (DAWBA)

## Brief Description

The DAWBA is a collection of measures mental health including interviews and questionnaires, which are designed to yield ICD-10 and DSM-IV psychiatric diagnoses on 5-17 year olds. While some of these measures are delivered as interviews, some are also questionnaires.

## Versions

- Interview for parents of 5-17 year olds
- Interview for 11-17 year olds themselves
- Questionnaire for teachers of 5-17 year olds

## Length

- Parent interview 50 minutes
- youth interview 30 minutes
- questionnaire 67 items

## Scales and subscales

Questions cover criteria required to make diagnoses of:

- Separation anxiety (parent and self-report)
- Specific phobia (parent and self-report)
- Social phobia (parent and self-report)
- Panic disorder / agoraphobia (self-report)
- Post-traumatic stress disorder (parent and self-report)
- Obsessive compulsive disorder (parent and self-report)
- Generalised anxiety disorder (parent and self-report)
- Major depression (parent and self-report)
- ADHD / hyperkinesia (parent and teacher report)
- Oppositional defiant disorder (parent and teacher report)
- Conduct disorder (parent, teacher and self-report)

Clinician ratings of all sources of information can also cover:

- Anxiety disorder, not otherwise specified
- Depressive disorder, not otherwise specified
- Disruptive behavioral disorder, not otherwise specified
- Eating disorders, including anorexia nervosa
- Pervasive developmental disorders, including infantile autism
- Tic disorders, including Tourette syndrome
- Selective mutism and attachment disorders
- Psychotic disorders

## Response scales

- Vary from question to question

### **References and Contacts**

Goodman R, Ford T, Richards H, *et al.* (2000) The Development and Well-Being Assessment: Description and initial validation of an integrated assessment of child and adolescent psychopathology. *Journal of Child Psychology and Psychiatry*, 41, 645-55.

<http://www.dawba.com>

# Devereux Scales of Mental Disorders

## Brief Description

The measure was constructed to reflect a broad range of behavioural indicators of psychopathology. The scales cover emotional and behavioural disorders and are designed to be used for both treatment planning and outcome evaluation.

## Versions

- Parent 5-12 years
- Parent 13-18 years
- Teacher 5-12 years
- Teacher 13-18 years

## Length

- 111 items for 5-12
- 110 for ages 13-18
- Approximately 20 minutes

## Scales and subscales

- 6 subscales:
  - conduct
  - attention
  - delinquency
  - anxiety
  - depression
  - autism
  - acute problems
- Can also be grouped into internalising and externalising.

## Response scales

- never, rarely, occasionally, frequently and very frequently

## References and Contacts

Naglieri, J. A., LeBuffe, P. A., & Pfeiffer, S. I. (1994). *Devereux Scales of Mental Disorders*. San Antonio: The Psychological Corporation.

Spivack G. & Levine, M. (1964). The Devereux Child Behavior rating scales: A study of symptom behaviours in latency age atypical children. *American Journal of Mental deficiency*, 68, 700-717.

# Dominic Interactive

## Brief Description

The *Dominic Interactive* is a computer-based assessment for children. Using colour pictures, a child named Dominic is placed in 90 different situations: at home, school and with other children, which represent emotional and behavioural DSM-IV symptoms. There is sound accompaniment, which describes each situation and asks whether the child would react the same way as Dominic. The child responds by selecting either 'yes' or 'no'. 'Tendencies' are assessed as: not likely, possible, or likely.

## Versions

- The Dominic Interactive: 6-11 years
- The Dominic Adolescent: 12-16 years

## Length

- 90 situations are displayed
- Takes approximately 10-15 minutes to complete

## Scales and subscales

- Diagnostic categories:
  - specific phobias
  - separation anxiety disorder (SAD)
  - generalized anxiety disorder (GAD)
  - major depression/dysthymia (MDD)
  - oppositional defiant disorder (ODD)
  - conduct disorder (CD)
  - attention deficit
  - externalizing disorders
  - internalizing disorders
  - a total score combining all symptoms of hyperactivity disorder (ADHD)

## Response scales

- Yes/no response

## Cost

- \$5.00 for each application
- Discounts are available for large orders (20% off orders over \$1,000)

## References and Contacts

Hardoon, K. & Derevensky, J. L. (2002). Test Review: The Dominic Interactive. *Canadian Journal of School Psychology, 17*, 69-74.

Scott, T. J., Short, E. J., Singer, L. J., Russ, S. W. & Minnes, S. (2006) Psychometric Properties of the Dominic Interactive Assessment: A Computerized Self-Report for Children. *Assessment, 13*; 16-26

[www.dominicinteractive.com](http://www.dominicinteractive.com)

# Feelings Attitudes and Behaviors Scale for Children (FAB-C)

## Brief Description

The FAB–C providing assessment of emotional and behavioral problems for children aged 6-13 years. It measures Conduct Problems, Self-Image, Worry, Negative Peer Relations, and Antisocial Attitudes, assesses test-taking attitudes, and gives an overall Problem Index, which helps identify children who might benefit from a more detailed assessment. It also contains a 'lie scale'

## Versions

- Child report

## Length

- 48 items (10-15 minutes)

## Scales and subscales

- Conduct Problems
- Self-Image
- Worry
- Negative Peer Relations
- Antisocial Attitudes
- Lie
- Problem Index

## Example Items

- I am fun to be with
- I do many bad things
- It's ok to get angry
- I am always good

## Cost

- Online version: \$2 per application
- Paper version: \$44 for 25 copies

## References and Contacts

Beitchman, J. H., Raman, S., Carlson, J., Clegg, M. & Kruidenier, B (1985). The Development and validation of the children's self-Report Psychiatric Rating Scale. *Journal of the American Academy of Child Psychiatry, 24(4):* 413-428.

# HoNOSCA

## **Brief Description**

Two sections comprise the HoNOSCA: 1) 13 items about problems and impairment, 2) two questions covering lack of information about difficulties and services (optional). Section 2) is not included in the parent and self-report versions.

## **Versions**

- Clinician
- Parent
- Self-report

## **Length**

- 13 items plus two further optional questions in the clinician report.
- Takes approximately 5-8 minutes to complete

## **Scales and subscales**

- Section 1)
  - behaviour
  - impairment
  - symptoms and
  - social
- A total score can also be calculated for all 13 items
- Section 2)
  - 2 questions concerning lack of information about difficulties and services

## **Response scales**

- The items on the clinician report are rated on a 5 point scale (no problem, minor problem requiring no action, mild problem but definitely present, moderately severe problem, and severe to very severe problem).
- The items in the parent and self-report versions are also rated on a 5 point scale (not at all, insignificantly, mild but definitely, moderately and severely).

## **Example Items**

- Have you been troubled by your disruptive behaviour, physical or verbal aggression?
- Have you been troubled by relationships in your family or substitute home?
- Have you been feeling in a low or anxious mood, or troubled by fears, obsessions or rituals?

## **Cost**

- Materials are free of charge for UK Services

### **References and Contacts**

- Gerralda, M. E., & Yates, P. (2000). Commentary: HoNOSCA: Uses and Limitations. *Child Psychology and Psychiatry*, 5(3), 131-132.
- Gowers, S.G., Harrington, R.C., Whitton, A., Beevor, A., Lelliott, P., Jezzard, R., & Wing, J. (1999). Health of the Nation Outcome Scales for Children and Adolescents (HoNOSCA). Glossary for HoNOSCA score sheet. *British Journal of Psychiatry*, 174, 428-431.
- Gowers, S.G., Harrington, R.C., Whitton, A., Lelliott, P., Wing, J., Beevor, A., & Jezzard, R. (1999). A Brief Scale for measuring the outcomes of emotional and behavioural disorders in children: HoNOSCA. *British Journal of Psychiatry*, 174, 413-416.

# MacArthur Health and Behavior Questionnaire (HBQ)

## Brief Description

The HBQ is an adult-report measure, consisting of a set of child health and behaviour items derived primarily from existing measures. It covers areas of health and functioning such as mental health, physical health, and academic and social functioning.

## Versions

- Parent and teacher report versions for 4-8 year olds
- Parent, teacher and self report versions for 9-18 year olds

## Length

- Parent version: 140 items.
- Teacher version: 115 items (omits items relating to separation anxiety and home context)
- 20-30mins each

## Scales and subscales

- The four health domains and 18 preliminary subscales covering:
  - Emotional and behavioural symptoms
    - externalizing symptoms
    - attention-deficit/hyperactivity disorder (ADHD) symptoms
    - internalizing symptoms
    - functional impairment
    - mental health care utilization (Mental health)
  - Physical health
    - Global physical health symptoms
    - chronic medical conditions
    - physical health care utilization (physical health)
  - Social adaptation
    - peer acceptance/rejection
    - bullied by peers
    - prosocial behaviour
    - asocial with peers
    - social inhibition
    - adult- led recreational activities (social adaptation)
  - School adaptation
    - school engagement
    - academic competence
    - teacher–child closeness
    - teacher–child conflict (school adaptation)

**Response scales**

- dichotomous (e.g., “yes” versus “no”) or 3 or 4 point Likert scales consisting, for example, of 0 (“never or not true”), 1 (“sometimes true”), and 2 (“often or very true”)

**Example Items**

- Doesn't smile or laugh much
- Worries about doing better at things
- Destroys things belonging to his/her family or other children

**Cost**

- Free of charge

**References and Contacts**

- Armstrong J. M. & Goldstein L. H., & the MacArthur Working Group on Outcome Assessment (2003), *Manual for the MacArthur Health and Behavior Questionnaire (HBQ 1.0)*. Pittsburgh: University of Pittsburgh
- Essex, M. J., Boyce, W., Thomas M. D., Goldstein, L. H., Armstrong, J. Kraemer, H., C., & Kopfer, D. J. M. D. (2002). The confluence of mental, physical, social, and academic difficulties in middle childhood. II: Developing the MacArthur Health and Behavior Questionnaire. *Journal of the American Academy of Child & Adolescent Psychiatry*, 41(5), 588-603.
- Lemery-Chalfant, K., Schreiber, J. E., Schmidt, N. L., Van Hulle, C. A., Essex, M. J., & Goldsmith, H. H. (2007). Assessing internalizing, externalizing, and attention problems in young children: Validation of the MacArthur HBQ. *Journal of the American Academy of Child & Adolescent Psychiatry*, 46(10) 1315 - 1323.

# Massachusetts Youth Screening Instrument – version 2

## **Brief Description**

The MAYSI is a mental health screening tool used in youth justice facilities to identify young people with specific mental health problems.

## **Versions**

- Child report only, ages 12-17 years

## **Scales and subscales**

- alcohol
- drug use
- angry-irritable
- depressed-anxious
- somatic complaints
- suicide ideation
- thought disturbance
- traumatic experiences

## **Example Items**

- Have you used alcohol or drugs to make you feel better?
- Have you felt like hurting yourself?
- Have nervous or worried feelings kept you from doing things you want to do?

## **References and Contacts**

Grisso, T. & Quinlan, J. C. (2005). Massachusetts Youth Screening Instrument – version 2. In Grisso T., Vincent, G. & Seagrave, D (Eds.), *Mental health screening and assessment in juvenile justice* (pp. 99-111). New York: Guilford Press.

# Me and My School (M&MS)

## **Brief Description**

Developed specifically for the Me and My School Project in order to assess the mental health of children in schools. Respondents are asked to rate how often they act or feel a certain way in response to series of negatively and positively phrased items.

## **Versions**

- Child report

## **Length**

- 24 items (approximately 10 minutes)

## **Scales and subscales**

- Emotional problems
- Behavioural problems

## **Response scales**

- 3 point response scale (never, sometimes, always)

## **Example Items**

- I feel happy
- I feel lonely
- I lose my temper

## **References and Contacts**

[www.meandmyschool.info](http://www.meandmyschool.info)

# Millon Pre-Adolescent Clinical Inventory (M-PACI) and Millon Adolescent Clinical Inventory (MACI)

## Brief Description

These measures are designed to measure personality patterns, self-reported concerns and clinical symptoms in children (M-PACI) and teenagers (MACI). The suggested use is as screening tools, for treatment planning and to monitor patient progress.

## Versions

Child self-report only

M-PACI: 9-12 year olds

MACI 13-19 years version

## Length

MACI: 160 items (25-30 minutes)

M-PACI: 97 questions (15–20 minutes)

## Scales and subscales

- Contains 27 scales in three categories
  - Personality Patterns:
    - Introversive
    - Inhibited
    - Doleful
    - Submissive
    - Dramatizing
    - Egotistic
    - Unruly
    - Conforming
    - Oppositional
    - Self-Demeaning
    - Borderline Tendency
  - Expressed Concerns:
    - Identity Diffusion
    - Self-Devaluation
    - Body Disapproval
    - Sexual Discomfort
    - Peer Insecurity
    - Social Insensitivity
    - Family Discord
    - Childhood Abuse
  - Clinical Syndromes:
    - Eating Dysfunctions

- Substance Abuse Proneness
  - Delinquent Predisposition
  - Impulsive Propensity
  - Anxious Feelings
  - Depressive Affect
  - Suicidal Tendency
- Also has modifying indices that help identify test-taking attitudes as well as confused or random responding.
  - Scale X – Disclosure
  - Scale Y – Desirability
  - Scale Z - Debasement

### **Response scales**

- True/false

### **Cost**

- Prices vary according to test format and report format with increasing discounts per test administration for larger orders.
- MIROTEST Q Assessment System Software Preview Package = \$90.
- Mail-in scoring service preview package = \$90.
- Hand scoring starter kit = \$299.

### **References and Contacts**

- Millon, T. (1993). The Millon Adolescent Personality Inventory and the Millon Adolescent Clinical Inventory. *Journal of Counseling & Development, 71*, 570.
- Millon, T. (1993) Millon Adolescent Clinical Inventory Manual. Minneapolis: National Computer Systems.

# Missouri Children's Behavior Checklist (MCBC)

## Brief Description

This measure is a parent report questionnaire of the behaviour of normal and clinical children. 77 statements, derived from the existing literature are used to cover six dimensions of behaviour.

## Versions

- Parent report only: 5-16 years

## Length

- 77 items

## Scales and subscales

- 6 dimensions of behaviour:
  - Aggression
  - Inhibition
  - activity level
  - sleep disturbance
  - somatization
  - sociability

## Response scales

- Yes/no

## Example Items

- Becomes so upset by changes in routine such as changing residences or schools or when expecting visitors that the child may vomit or report bodily aches, headaches, stomach aches, or feelings of nausea
- Cries out in sleep
- Says as for instance, "I'll get even," "You won't get away with that," "I'll show him," expresses desire for revenge

## Cost

- Free

## References and Contacts

- Sines, J. O. Pauker, J. D., Sines, L. K., & Owen, D. R. (1969). Identification of clinically relevant dimensions of children's behavior. *Journal of Consulting & Clinical Psychology, 33*(6), 728-734.
- Thompson, R. J., Curry, J. F., Sturner, R. A., Green, J. A., & Funk, S. G. (1982). Missouri Children's Behavior Checklist Ratings of Preschool Children as a Function of Risk Status for Developmental and Learning Problems. *Journal of Pediatric Psychology, 7*, 307-316.

# Ontario Child Health Scale (OCHS)

## Brief Description

The Ontario Child Health Scale (OCHS) aims to identify five psychiatric disorders of childhood – internalising disorders of depression and anxiety, and externalising disorders of oppositional defiance (ODD), attention deficit (ADHD) and conduct.

## Versions

- covering ages 6-16
  - Parent
  - teacher
  - self-report

## Length

- Parent and youth versions contain 104 items
- Teacher version contains 83 items

## Scales and subscales

- Internalising disorders:
  - depression
  - anxiety
- Externalising disorders:
  - oppositional defiance (ODD)
  - attention deficit (ADHD)
  - conduct

## References and Contacts

Place M., Martin, E., Hildreth A. J., Wilson J., Hulsmeier J. (1999). Validating the Ontario Child Health Scale in a UK population. *European child & adolescent psychiatry*, 8(4) 255-259.

# Parent-Child Rating Scale (P-CRS)/Teacher-Child Rating Scale (T-CRS)

## Brief Description

The P-CRS is a 39-item parent report measure assessing children's behavioural, social and emotional functioning. It also contains 9 additional items about the child's future. The T-CRS is a 32-item measure reflecting the following domains: 1) Task Orientation, 2) Behavior Control, 3) Assertiveness, and 4) Peer Social Skills.

## Versions

- P-CRS - Parent-Child Rating Scale
- T-CRS - Teacher-Child Rating Scale

## Length

- 39 items

## Scales and subscales

- Assesses six domains of socio-emotional adjustment:
  - Negative Peer Social Skills
  - Positive Peer Social Skills
  - Assertive Social Skills
  - Task Orientation
  - Shy-Anxious/Withdrawn
  - Frustration Tolerance

## Response scales

- 5 point Likert scale: Strongly Agree to Strongly Disagree.

## Example Items

- My child.....
  - is often happy
  - cries easily
  - likes to play with other children

## Cost

\$2.00 US per instrument (paper or electronic copy)

## References and Contacts

Hightower, A. D., Work, W. C., Cowen, E. L., Ltyscewski, B. S., Spinell, A. P., Guare, J. C., Rohrbeck, C. A. (1986). *Parent-Child Rating Scale*. *School Psychology Review*, 15, 393-409.

Hightower, A. D., Work, W. C., Cowen, E. L., Lotyczewski, B. S. Spinell, A. P., Guare, J. C., & Rohrbeck, C. A. (1986). The Teacher-Child Rating Scale: A brief objective

measure of elementary children's school problem behaviors and competencies.  
School Psychology Review, 15, 393-409.

# Pediatric Symptom Checklist (PSC)

## Brief Description

The Pediatric Symptom Checklist (PSC) and the Youth Pediatric Symptom Checklist (Y-PSC) are parent- and child-report questionnaires designed for screening school-age children for psychosocial problems. It assesses both emotional and behavioural problems.

## Versions

- PSC - parent report 6-16
- Y-PSC - self-report 11+

## Length

- 35 items in both versions
- 17 item version also now available

## Scales and subscales

- All items are summed to give an overall score of psychological impairment

## Response scales

- 3 point scale (never, sometimes, often)

## Example Items

- Complains of aches/pains
- Is afraid of new situations
- Worries a lot

## Cost

- Free

## References and Contacts

Jellinek, M. S., Murphy J. M. ; Robinson J. ; Feins A. ; Lamb S. & Fenton T. (1988).  
Pediatric symptom checklist: screening school-age children for psychosocial dysfunction. *The Journal of Pediatrics*, 112(2): 201-209.

# Reynolds Adolescent Adjustment Screening Inventory

## **Brief Description**

The RAASI can be used to screen adolescents and identify those who may be at risk for psychological adjustment problems. It is written at a 3rd grade (US, equivalent of 8-9 years of age) reading level and assesses antisocial behavior, anger control problems, emotional distress, and positive self. It also yields a total adjustment score.

## **Versions**

- Adolescent report (12-19 years)

## **Length**

- 32 items (5 minutes)

## **Scales and subscales**

### **Response scales**

- Antisocial Behavior
- Anger Control Problems
- Emotional Distress
- Positive Self

## **References and Contacts**

Reynolds, W. M. (2001). *Reynolds Adolescent Adjustment Screening Inventory*. Florida: Psychological Assessment Resources.

Plake, B. S., Impara, J. C., & Spies, R. A. (Eds.). (2003). *The fifteenth mental measurements yearbook*. Lincoln, NE: Buros Institute of Mental Measurements.

# Rutter Scales (Revised Rutter Scales)

## Brief Description

The Rutter Scales measure psychopathology and prosocial behaviour, allowing the assessment of specific syndrome scales as well as index of global functioning. Scales measure both emotional and behavioural functioning.

## Versions

- Parent report
- Teacher report
- 3-5 years
- 6-16 years

## Length

26 items

## Response scales

- 3 point scale: does not apply, applies somewhat, certainly applies.

## Example Items

- Often tells lies
- Truants from school
- Resentful or aggressive when corrected

## References and Contacts

- Hogg, C., Rutter, M. & Richman, N. (1997). Emotional and behavioural problems in children. In I. Inslare (Ed.), *Child psychology portfolio* (pp. 1-13). Windsor: NFER-Nelson.
- Parker, Yiming, Tan & Rutter, M (2001). The Development of a Brief Screening Measure of Emotional Distress in Children. *Journal of Child Psychology and Psychiatry*, 42, 221-225.
- Rutter, M., Tizzard, J. & Whitmore, K. (1970). *Educational Health and Behaviour*. London: Longman.
- Rutter, M. (1967) A children's behaviour questionnaire for completion by teachers: preliminary findings. *Journal of Child Psychology and Psychiatry*, 8, 1-11.

# School Children's Happiness Inventory (SCHI)

## **Brief Description**

The measure was developed to reflect self-esteem, affect and depression in school children.

## **Versions**

- Child self-report only (ages 8-15)

## **Length**

- 30 items

## **Scales and subscales**

- All items are summed to give an overall score of subjective well-being

## **Response scales**

- Responses on each SCHI item were scored on a range of "1" to "4", with 4 indicating a high subjective well being

## **Example Items**

- I was tired
- I was interested in working
- I felt upset

## **References and Contacts**

Ivens, J. (2007). The Development of a Happiness Measure for School children. *Educational Psychology in Practice*, 22(3), 221-239.

# Strengths and Difficulties Questionnaire (SDQ)

## Brief Description

The SDQ is a behavioural screening questionnaire for 3-16 year olds. It consists of 25 closed-ended questions and an impact supplement, which assesses the extent to which mental health problems have had an impact on aspects of the child's life.

## Versions

- Self-report for older children (11-16)
- Parent and teacher reports (3-16)

## Length

- 25 items (5 minutes)

## Scales and subscales

- 5 domains:
  - conduct symptoms
  - emotional symptoms
  - hyperactivity
  - peer relationships
  - prosocial behaviour

## Response scales

- 0, 1, 2 (not true, somewhat true, certainly true)

## Example Items

- I get a lot of headaches, stomach-aches, or sickness
- I get very angry and often lose my temper
- I usually do as I am told

## Cost

- Free/Negligible for research purposes

## References and Contacts

Goodman, R. (1997). The Strengths and Difficulties Questionnaire: A Research Note. *Journal of Child Psychology and Psychiatry*, 38, 581-586.

Goodman, R (2001). Psychometric properties of the Strengths and Difficulties Questionnaire (SDQ). *Journal of the American Academy of Child and Adolescent Psychiatry*, 40, 1337-1345.

# Symptoms Check List (SCL)

## **Brief Description**

The SCL-90-R is used to assess a range of psychological difficulties and can also be used to measure patient progress or treatment outcomes. The test has been used for 4 groups: adult psychiatric outpatients, adult nonpatients, adult psychiatric inpatients and adolescent nonpatients.

## **Length**

- 90 items

## **Scales and subscales**

- Contains 9 primary symptom dimension scales:
  - Somatization
  - Obsessive-Compulsive
  - Interpersonal Sensitivity
  - Depression
  - Anxiety
  - Hostility
  - Phobic Anxiety
  - Paranoid Ideation
  - Psychoticism
- 3 global indices scales:
  - Global Severity Index
  - Positive Symptom Distress Index
  - Positive Symptom Total

## **Response scales**

- Five-point scale (0-4) ranging from "Not at All" to "Extremely".

## **References and Contacts**

Derogatis, L., R. (1977). SCL-90R Administration, Scoring and Procedures Manual-I for the Revised Version.

# Symptoms and Functioning Severity Scale (SFSS), Peabody Treatment Progress Battery (PTPB)

## **Brief Description**

The Peabody Treatment Progress Battery (PTPB) contains 10 measures to assess teenager responses to treatment. Measures include the following:

### **Symptoms and functioning severity scale**

Life satisfaction scale, a hopefulness scale

Outcome expectations scale

Therapeutic alliance scale

Counselling impact scale

Motivation for treatment scale

**The Symptoms and Functioning Severity Scale (SFSS)** is a global measure of severity. Items cover 4 domains: ADHD, conduct/oppositional disorder, depression, and anxiety. Each item asks the respondent to rate how frequently the young person experienced certain emotions or showed certain behaviours within the last two weeks.

## **Versions**

- Clinician, youth, and adult caregiver versions for ages 11-18 years

## **Length**

- 33 items (5-8 minutes)
- Two equivalent short forms (Form A and Form B) are available.
  - Short Form A 17 items
  - Short Form B includes 16 items

## **Scales and subscales**

- Items are based on four mental health disorders:
  - ADHD
  - conduct/oppositional disorder
  - depression
  - anxiety
- Additional items about peer and family relationship problems, and drug and alcohol use
- Scores are reported as a total score, with internalising and externalising subscale scores

## **Response scales**

- Response scale is a 5 point Likert scale (never, hardly ever, sometimes, often, and very often)

**Example Items**

- In the last two weeks how often did you.....
  - Throw things when you were mad?
  - Have little or no energy?
  - Lie to get things you wanted?

**Cost**

- Free

**References and Contacts**

Peabody Treatment Progress Battery (2007), Vanderbilt University, Peabody College.

# Target Symptom Rating (TSR)

## Brief Description

The Target Symptom Rating (TSR) is a scale to assess psychiatric symptoms in children and adolescents. The TSR consists of 13 example-anchored items that cover the most commonly seen issues and problems in child psychiatric treatment.

## Versions

- clinical staff report
- parent report
- patient report

## Length

- Takes 5 to 10 min for clinicians to complete
- The oral rating format with parents or patients takes approximately 10 min

## Scales and subscales

- Emotional problems
- Behaviour problems

## Response scales

- 5-point severity scale

## Example Items

- I get a lot of headaches, stomach-aches, or sickness
- I get very angry and often lose my temper
- I usually do as I am told

## Cost

- Free

## References and Contacts

Barber et al. (2002) The Target Symptom Rating: a brief clinical measure of acute psychiatric symptoms in children and adolescents. *Journal of clinical child and adolescent psychology*; 31(2), 181-192.

# Youth Outcome Questionnaire (YOQ)

## **Brief Description**

The Y-OQ is a parent-report and self-report measure for children and young people between the ages of 4 and 18 years. It was constructed specifically to track treatment progress and is an extension of an adult outcomes instrument, the Outcome Questionnaire.

## **Versions**

- A parent report outcome and tracking measure
- A youth self report outcome and tracking measure
- A 30-item, single-subscale, self- report or parent/guardian report outcome and progress tracking measure

## **Length**

- 64 items

## **Scales and subscales**

- Six key areas:
  - intrapersonal distress
  - somatic
  - interpersonal relations
  - critical items
  - social problems
  - behavioural dysfunction

## **Response scales**

- 5 point response scale

## **Example Items**

- I have headaches or feel dizzy
- I have physical fights (hitting, biting, or scratching) with family or others my age
- I think about suicide or feel I would be better off dead

## **Cost**

- One time fee to use
- Rates available for clinics and large groups, approximately \$1,500 to \$3,000
- Only with computerized versions is cost computed per employee or per clinic. A standard software licensing fee is \$200 per clinician, per year. Additional measures can be licensed for \$40 per clinician, per year. Software licenses must be renewed annually. Installation Support - One time fee of \$150.
- No charge for the paper version.

### **References and Contacts**

- Burlingame, G., M., Wells, M., G., & Lambert, M., J. (1995). *The Youth Outcome Questionnaire*. Stevenson, MD: American Professional Credentialing Services
- Burlingame, G., M., Wells, M., G., Hoag, M., J., et al. (1996) *Manual for Youth Outcome Questionnaire(Y-OQ)*. Stevenson, MD: American Professional Credentialing Services
- Dunn T. W., Burlingame G. M., Walbridge M., et al. (2005) Outcome assessment for children and adolescents: Psychometric validation of the youth outcome questionnaire. *Clinical Psychology and psychotherapy, 12(5)*, 388-401
- Wells M. G., Burlingame G. M., Lambert M. J., et al. (1996). Conceptualization and measurement of patient change during psychotherapy: Development of the outcome questionnaire and youth outcome questionnaire. *Psychotherapy, 33(2)*, 275-283.

# YP CORE

## **Brief Description**

The Young Persons Clinical Outcomes in Routine Evaluation (YP CORE) measure consists of 10 items for use with 11-16 year olds. It is designed as a measure change for use in schools and young people services for practitioners to use.

## **Versions**

- Child self-report, ages 11-16

## **Length**

- 10 items

## **Scales and subscales**

- All items are summed to give an overall score

## **Example Items**

- I have felt tense, anxious or nervous
- I have felt panic or terror
- I have felt unhappy

## **Cost**

- Free but purchase of manual advised

## **References and Contacts**

Twigg, E., Barkham, M., Bewick, B. M., Mulhern, B., Connell, J., & Cooper M. (In Press).  
The Young Person's CORE: Development of a brief outcome measure for young people. [Unpublished manuscript]

# Quality of Life Measures

# Brief Multi-dimensional Student Life Satisfaction Scale (BMSLSS)

## Brief Description

This measure was designed to measure life satisfaction among children and adolescents aged 8 years and above in five domains: family, school, friends, self, and living environment. Five items are summed up to obtain a total life satisfaction score.

## Versions

- Child report

## Length

- 5 items

## Scales and subscales

- Each of the five items denotes one of the five life satisfaction domains (family, school, friends, self, and living environment).

## Response scales

- Items are rated on a 7-point scale with responses ranging from 1 (terrible) to 7 (delighted).

## Example Items

- I would describe my satisfaction with my family life as...
- I would describe my satisfaction with myself as...
- I would describe my satisfaction with my overall life as...

## References and Contacts

Huebner, E.S., Suldo, S.M., Valois, R.F., Drane, J.W., & Zullig, K. (2004). Brief Multidimensional Students' Life Satisfaction Scale (BMSLSS): Gender, race, and grade effects. *Psychological Reports, 94*, 351-356.

Seligson, J.L., Huebner, E.S., & Valois, R.F. (2003). Preliminary validation of the brief multidimensional students' life satisfaction scale (BMSLSS). *Social Indicators Research, 61*, 121-145.

# Child Health Questionnaire

## **Brief Description**

The Child Health Questionnaire is a paediatric, health-related quality of life measure, which has been designed (and normed) for children 5 -18 years of age. It measures 14 physical and psychosocial concepts. Scores can be analysed separately (CHQ Profile Scores) or combined to give an overall physical and psychosocial score (CHQ Summary Scores).

## **Versions**

- Self report (10+ yrs)
- Parent report (5-18yrs)

## **Length**

- Self report: 87 items
- Parent report: 28 or 50

## **Example Items**

- Has your child been limited in the amount of time he/she could spend on schoolwork or activities with friends due to emotional difficulties or problems with his/her behavior?
- Has your child been limited in the kind of schoolwork or activities he/she could do with friends due to problems with his/her physical health?

## **Cost**

- Free for research purposes

## **References and Contacts**

[info@outcomes-trust.org](mailto:info@outcomes-trust.org)

# Generic Children's Quality of Life Measure (GCQ)

## **Brief Description**

The GCQ assesses the child's perception of his/her actual life and their perception of how they would like their life to be. The discrepancy between the actual and the desired viewpoints are used to establish the quality of life.

## **Versions**

- Child report

## **Length**

- 25 items

## **Example Items**

- How often they help others
- How often they hurt other people
- How often they have fun

## **References and Contacts**

Collier J, MacKinlay D, Phillips D. (2000). Norm values for the Generic Children's Quality of Life Measure (GCQ) from a large school-based sample. *Quality of Life Research* 2000 (9), 617-623.

# Kidscreen

## Brief Description

The kidscreen measures are designed to assess generic quality of life. The shortest measure give a general indicator of general health-related quality of life, whereas longer version covers more specific domains such as psychological well being, peers and social support, and autonomy. Measures have been normed for children and adolescents aged between 8 and 18 years. The measures have been used in several countries across Europe.

## Versions

- KIDSCREEN-52 (long version) covering ten Health-related quality of life (HRQoL) dimensions
- KIDSCREEN-27 (short version) covering five HRQoL dimensions
- KIDSCREEN-10 Index as a global HRQoL score
- Child report versions and a proxy measure for parents

## Length

- 52, 27 or 10 items depending on the version

## Scales and subscales

- KIDSCREEN-10: uni-dimensional global HRQoL
- KIDSCREEN-27: 5 dimensions:
  - Physical Well-Being
  - Psychological Well-Being
  - Autonomy & Parents
  - Peers & Social Support
  - School Environment
- KIDSCREEN-52: 10 dimensions:
  - Physical Well-being
  - Psychological Well-being
  - Moods and Emotions
  - Self-Perception
  - Autonomy
  - Parent Relations and Home Life
  - Social Support and Peers
  - School Environment
  - Social Acceptance (Bullying)
  - Financial Resources

## Response scales

- 5 point scale, labels vary

**Example Items**

- Have you felt fit and well?
- Have you had fun with your friends?
- Have you felt sad?

**Cost**

- Use of the questionnaires is free for research purposes but the KIDSCREEN Manual must be purchased

**References and Contacts**

Herdman, M., Rajmil, L., Ravens-Sieberer, U., Bullinger, M., Power, M., Alonso, J., and the European Kidscreen and Disabkids groups (2002). Expert consensus in the development of a European health-related quality of life measure for children and adolescents: a Delphi study. *Acta Paediatrica* 91 (12), 1385-90.

Ravens-Sieberer, U., Gosch, A., Abel, T., Auquier, P., Bellach, B.-M., Dür, W., Rajmil, L. & the European KIDSCREEN Group (2001). Quality of life in children and adolescents: a European public health perspective. *Social and Preventive Medicine* 46, 297-302.

# PedsQL Present Functioning Visual Analogue Scales (PedsQL VAS)

## Brief Description

The PedsQL VAS assess (through child and parent reports) domains of anxiety, sadness, anger, worry, fatigue and pain using visual analogue scales. The Total Symptom Score is calculated by taking the average of all six items, while the Emotional Distress Summary Score represents the mean of the anxiety, sadness, anger, and worry items.

## Versions

- Child report
- Parent report

## Length

- 6 items

## Scales and subscales

- anxiety
- sadness
- anger
- worry
- fatigue
- pain

## Response scales

- 10 cm line with a happy face at one end and a sad face at the other. Respondents are asked to mark on the line how they feel now.

## Example Items

- Child report: I feel afraid or scared; Other kids tease me
- Parent report: Problems with....other kids not wanting to be his or her friend; paying attention in class

## Cost

- Free of charge for non-funded academic research.
- Funded academic research: \$750 including delivery of 1 module + \$200 per additional module

## References and Contacts

Sherman, S.A., Eisen, S., Burwinkle, T. M. & Varni, J. W. (2006). The PedsQL™ Present Functioning Visual Analogue Scales: preliminary reliability and validity. *Health Quality of Life Outcomes*, 4, 75.

# Pictured Child's Quality of Life Self Questionnaire (AUQUEI)

## **Brief Description**

The AUQUEI is a French-developed, picture-based questionnaire to assess the child's subjective quality of life with a specific focus on their health.

## **Versions**

- Child report: 3- 5 yrs and 6 - 11 yrs

## **Length**

- 3 - 5 yrs: 26 items
- 6 -11 yrs: 33 items
- One open-ended question asking the child to relate a situation when they were very happy, happy, unhappy, very unhappy.

## **Scales and subscales**

- Several paediatric QOL domains
  - family life
  - social life
  - children's activities (school and leisure)
  - health

## **Response scales**

- The format for responses to the 26 items includes drawings of children showing an emotional state (four points from 'very dissatisfied' to 'very satisfied'). Open ended response for 1 question.

## **Example Item**

- How do you feel when you go to the doctors?

## **Cost**

- Free to non-funded academic research.
- Funded academic research distribution fee = 250 euros + 20 euros per version.

# Piers-Harris 2

## **Brief Description**

This measure provides an overview of self-concept using 60 questions covering 6 domains with a yes/no response format. It has been used in clinical and educational settings to identify children who may be experiencing difficulties.

## **Versions**

- Child report (7-18yrs)

## **Length**

- 60-items

## **Scales and subscales**

- Six subscales:
  - Behavioural Adjustment
  - Intellectual and School Status
  - Physical Appearance and Attributes
  - Freedom from Anxiety
  - Popularity
  - Happiness and Satisfaction

## **Response scales**

- Yes/No response

## **Cost**

- \$19.25 answer sheet (Pkgs. of 20)
- \$16.50 pc answer sheet - for use with the computer and CD (pads of 100)

## **References and Contacts**

Piers, E.V & Hertzberg, D.S. (2002). Piers-Harris 2: Piers-Harris Children's Self-Concept Scale (2nd Ed). Western Psychological Services, LA.

# Quality of Life Enjoyment and Satisfaction Questionnaire (PQ-LES-Q)

## **Brief Description**

This measure was developed to assess enjoyment and satisfaction in relation to daily life. The first 14 items are summed giving a total score. The final item asks "Overall, how has your life been?," used to produce a global rating.

## **Versions**

- Self report (6-17 yrs)

## **Length**

- 15 items

## **Response scales**

- 1, 2, 3, 4, 5 (Very Poor, Poor, Fair, Good, Very Good)

## **Example Items**

- Overall, how has your life been?
- Over the past week, how have things been with...

## **References and Contacts**

- Endicott J., Nee J., Harrison W., & Blumenthal R. (1993). Quality of Life Enjoyment and Satisfaction Questionnaire: a new measure. *Psychopharmacology Bulletin*, 29(2):321-6
- Endicott, J., Nee, J., Ruoyond, Y. & Wohlberg, C. (2006). Pediatric quality of life enjoyment and satisfaction questionnaire (PQ-LES-Q): Reliability and validity. *Journal of the American Academy of Child and Adolescent Psychiatry*, 45, 401-407.

# Quality of Life Profile Adolescent Version (QOLPAV)

## Brief Description

The Quality of Life Profile-Adolescent Version (QOLPAV) is a 54 item questionnaire which asks adolescents to rate items covering various aspects of quality of life for importance and satisfaction. Scores on importance and satisfaction are used to create quality of life scores.

## Length

- 54 items

## Scales and subscales

- 3 scales, each consisting of 3 subscales
  - Being
    - physical
    - psychological
    - spiritual
  - Belonging
    - physical
    - social
    - community
  - Becoming
    - practical
    - leisure
    - growth

## Response scales

- Five-point Likert scale from 1 (not at all important/no satisfaction at all) to 5 (extremely important/extremely satisfied)

## References and Contacts

Raphael D, Rukholm E, Brown I, Hill-Bailey P, Donato E.(1996) The quality of life profile – adolescent version. *Journal of Adolescent Health*, 19: 366–375.

# Youth Quality of Life Instrument – Research Version (YQOL-R)

## Brief description

This is designed to assess perceptual and contextual aspects of quality of life with respect to 'self', 'relationships', 'environment' and 'general quality of life'.

## Versions

Child report (11-18 yrs)

## Length

- 80 items

## Scales and subscales

- Assesses 4 domains associated with quality of life:
  - *Self*: feelings about themselves: belief in self, being oneself, mental health, physical health, and spirituality
  - *Relationship*: relations with others: adult support, caring for others, family relations, freedom, friendships, participation, and peer relations
  - *Environment*: opportunities and obstacles in their environment: engagement and activities, education, neighbourhood, monetary resources, personal safety, and view of the future
  - *General Quality of Life*: sense of how well their life is going overall: enjoying life, feeling life is worthwhile, and being satisfied with ones life
- The YQOL-R consists of 3 types of items:
  - Contextual (potentially verifiable)
  - perceptual (known only to the individual)
  - individual specific (top 5 facets most important to individual and 5 facets they would like to change for the better)

## References and Contacts

Edwards, T. C., Huebner, C. E., Connell, F. A., & Patrick, D. L. (2002). Adolescent quality of life, part I: Conceptual and measurement framework. *Journal of Adolescence*, 25(3), 275-286.

# Index of measures

- Achenbach System of Empirically Based Assessment (ASEBA), 4
- Beck Youth Inventories (BYI), 6
- Behavior Assessment System for Children (BASC), 8
- Behavioral and Emotional Rating Scale (BERS), 10
- Brief Multi-dimensional Student Life Satisfaction Scale (BMSLSS), 49
- Child Adaptive Behavior Inventory (CABI; CBI), 11
- Child Behavior Rating Form Typical IQ version (CBRF-TIQ), 12
- Child Health Questionnaire, 50
- Child Outcome Rating Scale (CORS), 14
- Child Symptom Inventories (CSI), 15
- Conners' Rating Scales (Conners, various years), 16
- Development and Well-Being Assessment (DAWBA), 19
- Devereux Scales of Mental Disorders 21
- Dominic Interactive, 22
- Feelings Attitudes and Behaviors Scale for Children (FAB-C), 23
- Generic Children's Quality of Life Measure (GCQ), 51
- HoNOSCA, 24
- Kidscreen, 52
- MacArthur Health and Behavior Questionnaire (HBQ), 26
- Massachusetts Youth Screening Instrument – version 2, 28
- Me and My School (M&MS), 29
- Millon Pre-Adolescent Clinical Inventory (M-PACI) and Millon Adolescent Clinical Inventory (MACI), 30
- Missouri Children's Behavior Checklist (MCBC), 32
- Ontario Child Health Scale (OCHS), 33
- Parent-Child Rating Scale (P-CRS)/Teacher-Child Rating Scale (T-CRS), 34
- Pediatric Symptom Checklist (PSC), 36
- PedsQL Present Functioning Visual Analogue Scales (PedsQL VAS), 54
- Pictured Child's Quality of Life Self Questionnaire (AUQUEI), 55
- Piers-Harris 2, 56
- Quality of Life Enjoyment and Satisfaction Questionnaire (PQ-LES-Q), 57
- Quality of Life Profile Adolescent Version (QOLPAV), 58
- Reynolds Adolescent Adjustment Screening Inventory, 37
- Rutter Scales (Revised Rutter Scales), 38
- School Children's Happiness Inventory (SCHI), 39
- Strengths and Difficulties Questionnaire (SDQ), 40
- Symptoms Check List (SCL), 41
- Symptoms and Functioning Severity Scale (SFSS), Peabody Treatment Progress Battery (PTPB), 42
- Target Symptom Rating (TSR), 44
- Youth Outcome Questionnaire (YOQ), 45
- Youth Quality of Life Instrument – Research Version (YQOL-R), 59
- YP CORE, 47